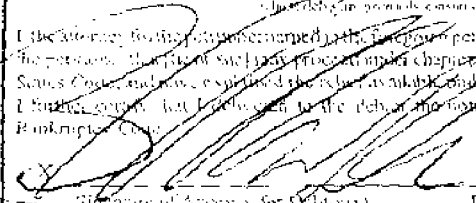


United States Bankruptcy Court Northern District of Illinois Eastern Division		Voluntary Petition																				
Name of Debtor (if individual, enter Last, First, Middle): <b>WILK, Lawrence C.</b>		Name of Joint Debtor (Spouse) (Last, First, Middle): <b>WILK, Geraldine M.</b>																				
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):																				
Last four digits of Soc. Sec./Complete EIN or other Tax I.D. No. (if more than one, state all): <b>8442</b>		Last four digits of Soc. Sec./Complete EIN or other Tax I.D. No. (if more than one, state all): <b>5256</b>																				
Street Address of Debtor (No. & Street, City, and State): <b>307 Old Country way Wauconda, IL 60084</b> ZIP CODE: <b>60084</b>		Street Address of Joint Debtor (No. & Street, City, and State): <b>SAME</b> ZIP CODE:																				
County of Residence or of the Principal Place of Business: <b>LAKE</b>		County of Residence or of the Principal Place of Business: <b>LAKE</b>																				
Mailing Address of Debtor (if different from street address): ZIP CODE:		Mailing Address of Joint Debtor (if different from street address): ZIP CODE:																				
Location of Principal Assets of Business Debtor (if different from street address above): ZIP CODE:																						
Type of Debtor (Joint or Organization) (Check one box.)	Nature of Business (Check all applicable boxes.)	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box)																				
<input checked="" type="checkbox"/> Individual (includes Joint Debtors) <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and provide the information requested below.) State type of entity: _____	<input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51A) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Nonprofit Organization qualified under 17 U.S.C. § 501(c)(3)	<input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding																				
Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (Applicable to individuals only) Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 101(b)(3). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (Applicable to Chapter 7 individuals only) Must attach signed application for the court's consideration. See Official Form 3B.		Nature of Debtor (Check one box) <input checked="" type="checkbox"/> Consumer Non-Business <input type="checkbox"/> Business Chapter 11 Debtors Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51A) <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51A) Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts owed to non-insiders in affiliates are less than \$2 million																				
Statistical/Administrative Information		DEBTOR'S CURRENT STATUS																				
<input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.																						
Estimated Number of Creditors																						
<table border="1" style="width: 100%; text-align: center;"> <tr> <th>1-49</th> <th>50-99</th> <th>100-199</th> <th>200-999</th> <th>1,000-5,000</th> <th>5,001-10,000</th> <th>10,001-25,000</th> <th>25,001-50,000</th> <th>50,001-100,000</th> <th>OVER 100,000</th> </tr> <tr> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>		1-49	50-99	100-199	200-999	1,000-5,000	5,001-10,000	10,001-25,000	25,001-50,000	50,001-100,000	OVER 100,000	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
1-49	50-99	100-199	200-999	1,000-5,000	5,001-10,000	10,001-25,000	25,001-50,000	50,001-100,000	OVER 100,000													
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>													
Estimated Assets																						
<table border="1" style="width: 100%; text-align: center;"> <tr> <th>\$0 to \$50,000</th> <th>\$50,001 to \$100,000</th> <th>\$100,001 to \$500,000</th> <th>\$500,001 to \$1 million</th> <th>\$1,000,001 to \$10 million</th> <th>\$10,000,001 to \$50 million</th> <th>\$50,000,001 to \$100 million</th> <th>More than \$100 million</th> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>		\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	More than \$100 million	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	More than \$100 million															
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>															
Estimated Debts																						
<table border="1" style="width: 100%; text-align: center;"> <tr> <th>\$0 to \$50,000</th> <th>\$50,001 to \$100,000</th> <th>\$100,001 to \$500,000</th> <th>\$500,001 to \$1 million</th> <th>\$1,000,001 to \$10 million</th> <th>\$10,000,001 to \$50 million</th> <th>\$50,000,001 to \$100 million</th> <th>More than \$100 million</th> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>		\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	More than \$100 million	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>					
\$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1 million	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000,001 to \$100 million	More than \$100 million															
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>															

Official Form 101 (2007)

FOR FILING ONLY

<b>Petition</b> <i>(This page must be completed on filer's own case.)</i>		Name of Debtor(s) <b>WILK, Lawrence C. &amp; Geraldine M.</b>	
Prior Bankruptcy Case Filed Within Last 8 Years (Indicate that one, attach additional sheet)			
Location Where Filed:	Case Number:	Date Filed:	
Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet)			
Name of Debtor:	Case Number:	Date Filed:	
District:	Reinstating:	Judge:	
<b>Exhibit A</b> (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)  <input type="checkbox"/> Exhibit A is attached and made a part of this petition.		<b>Exhibit B</b> (To be completed if debtor is an individual who is filing for personal consumer debts.) I, the attorney for the petitioner named in the foregoing petition (debtor and I) have informed the creditors of the debtor of such debt proceedings under chapters 11, 12, or 13 of title 11, United States Code, and have explained the rights as such creditors under such chapter. I further certify that I have given to the debtor the notice required by § 342(a) of the Bankruptcy Code.   Signature of Attorney for Debtors Date	
<b>Exhibit C</b> Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?  <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input type="checkbox"/> No.		<b>Certification Concerning Debt Counseling</b> by Individual/Joint Debtor(s) <input checked="" type="checkbox"/> I/we have received approved budget and credit counseling during the 180-day period preceding the filing of this petition. <input type="checkbox"/> I/we request a waiver of the requirement to obtain budget and credit counseling prior to filing, based on exigent circumstances. (Attach a certification describing:	
<b>Information Regarding the Debtor (Check the Applicable Boxes)</b>			
Venue (Check any applicable box)			
<input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer period such that 180 days claim in any other District.			
<input type="checkbox"/> There is a bankruptcy case concerning debtor's estate, general partner, or partnership pending in this District.			
<input type="checkbox"/> Debtor is a debtor in a foreign proceeding and may be more properly placed in this court for an equitable distribution of the United States in this District, or has no principal place of business or assets in the United States, or is a foreign debtor in a foreign proceeding (in a federal or state court) in this District or the interests of the creditors will be served by venue in the court sought in this District.			
<b>Statement by a Debtor Who Resides as a Tenant of Residential Property</b> <i>(Check all applicable boxes)</i>			
<input type="checkbox"/> Landlord has a judgment against the debtor for possession or default in a lease agreement (attach a copy of the following):  Name of landlord that obtained judgment:  (Address of landlord)			
<input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there is a court action in which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and:			
<input type="checkbox"/> Debtor has included in this petition the deposit with the court of any sum that could become due during the 90-day period prior the filing of the petition.			

## Voluntary Petition

(This page must be completed and filed in every case.)

## Name of Debtor(s)

WILK, Lawrence C. &amp; Geraldine M.

## Signatures

## Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7, I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by § 342(b) of the Bankruptcy Code.

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X Lawrence C. Wilk

Signature of Debtor Lawrence C. Wilk

X Geraldine M. Wilk

Signature of Joint Debtor Geraldine M. Wilk

Telephone Number (If not represented by attorney)

Date

## Signature of Attorney

X Bonnie L. Macfarlane

Printed Name of Attorney for Debtor(s) Bonnie L. Macfarlane

Printed Name of Attorney for Debtor(s)

BONNIE MACFARLANE, P.C.

Firm Name

106 W. State Road PO Box 268  
Island Lake, IL 60042

Address

(847) 487-0700

Telephone Number

Date

## Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

## Signature of a Foreign Representative of a Recognized Foreign Proceeding

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign main proceeding, and that I am authorized to file this petition. A certified copy of the order granting recognition is attached.

X

(Signature of Foreign Representative)

(Printed Name of Foreign Representative)

Date

## Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notice and information required under 11 U.S.C. §§ 110(b), 110(b), and 342(d), and (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(b) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19-B is attached.

Printed Name and title (title of Bankruptcy Petition Preparer)

Social Security number for the bankruptcy petition preparer is not an individual state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer as Required by 11 U.S.C. § 110.

Address

X

Date

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person or partner whose social security number is provided above

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

I declare this petition preparer is complying with the provisions of rule 11 and the Federal Rules of Bankruptcy Procedure, and is not receiving compensation or both 11 U.S.C. § 110, 111, § 342(b).

Form 6-Summary  
(1/95)

# United States Bankruptcy Court

NORTHERN District Of ILLINOIS

EASTERN DIVISION

In re WILK, Lawrence C.  
WILK, Geraldine M.  
Debtor

Case No. \_\_\_\_\_

Chapter 7

## SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities."

### AMOUNTS SCHEDULED

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	YES	1	\$ 235,000.00		
B - Personal Property	YES	3	\$ 24,258.60		
C - Property Claimed as Exempt	YES	1			
D - Creditors Holding Secured Claims	YES	1		\$ 244,207.67	
E - Creditors Holding Unsecured Priority Claims	YES	1		\$ -0-	
F - Creditors Holding Unsecured Nonpriority Claims	YES	6		\$ 65,969.00	
G - Executory Contracts and Unexpired Leases	YES	1			
H - Contingencies	YES	1			
I - Current Income of Individual Debtor(s)	YES	1			\$ 4,173.79
J - Current Expenditures of Individual Debtor(s)	YES	1			\$ 4,173.79
<b>TOTAL</b>		<b>17</b>	<b>\$ 259,258.60</b>	<b>\$ 310,176.61</b>	

Form B6A  
05/08

WILK, Lawrence C.  
 WILK, Geraldine M.  
 In re \_\_\_\_\_  
 Debtor

Case No. \_\_\_\_\_  
 (If known)

## SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a co-tenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

**Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
307 Old Country Way Wauconda, IL 60084	Wachovia	JT	235,000.00	232,000.00

Total ➤ 235,000.00  
 (Report also on Summary of Schedules.)

Form B-1  
1/01/08

WILK, Lawrence C.  
WILK, Geraldine, M.

In re \_\_\_\_\_  
Debtor

Case No. \_\_\_\_\_  
(If known)

## SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "X" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." In providing the information requested in this schedule, do not include the name or address of a minor child. Simply state "a minor child."

TYPE OF PROPERTY	NONE	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand				10.00
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and home- stead associations, or credit unions, brokerage houses, or cooperatives		First Midwest Bank National City Bank		150.00 80.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment				900.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc and other collections or collectibles				
6. Wedding apparel				100.00
7. Furs and jewelry	X			
8. Firearms and sports, photographic, and other hobby equipment	X			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issuer.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the records of any such interest(s).) 11 U.S.C. § 521(c), Rule 1007(b)(5)	X			

Form B7B-Cent  
(10/05)

WILK, Lawrence C.  
In re: WILK, Geraldine, M.  
Debtor

Case No. \_\_\_\_\_  
(If known)

**SCHEDULE B - PERSONAL PROPERTY**  
(Continuation Sheet)

TYPE OF PROPERTY	NONE	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		401 (k) Hers - 5,494.63 401 (k) His - 2,103.97		7,598.60
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor, including tax refunds. Give particulars.		Tax Refund 2007 <i>used to pay mortgage debt</i>		5,815.00
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			

Form 106B (cont.)  
(10/05)

In re WILK, Lawrence C.  
WILK, Geraldine M.  
Debtor

Case No. \_\_\_\_\_  
(If known)

## SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	YES OR NO	DESCRIPTION AND LOCATION OF PROPERTY	APPROXIMATE DATE FIRST ACQUIRED	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
22. Patents, copyrights, and other intellectual property. Give particulars	X			
23. Licenses, franchises, and other general intangibles. Give particulars	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories		2004 Ford Taurus 60,000 miles owes \$11,741.96		\$9,605.00
26. Boats, motors, and accessories	X			
27. Aircraft and accessories	X			
28. Office equipment, furnishings, and supplies	X			
29. Machinery, fixtures, equipment, and supplies used in business	X			
30. Inventories	X			
31. Animals	X			
32. Crops - growing or harvested Give particulars	X			
33. Farming equipment and implements	X			
34. Farm supplies, chemicals, and feed	X			
35. Other personal property of any kind not already listed. Itemize	X			
Total				\$ 24,258.60

\_\_\_\_ continuation sheets attached

(Include amounts from any continuation  
sheets attached. Report total also on  
Summary of Schedules.)



Form 306C  
(10/07)

Lawrence C. Wilk

In re Geraldine M. Wilk

Debtor

Case No. \_\_\_\_\_  
(If known)

## SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:  
(Check one box)

- ☐ 11 U.S.C. § 522(b)(2)  
☐ 11 U.S.C. § 522(b)(3)

☐ Check if debtor claims a homestead exemption that exceeds \$125,000.

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
Residence	735H.C.S. 12-901	Real Property \$15,000 per	235,000.00 <del>307,000.00</del>
Necessary Wearing	735H.C.S. 12-1001(c)	100%	100.00
Personal Property	735H.C.S. 12-1001(b)	100%	1,140.00
Motor Vehicle	735H.C.S. 12-1001(a)	\$2,400 any vehicle	4,800.00
Tools of Trade	735H.C.S. 12-1001(d)	\$1,500 max value	-0-
Health Aids	735H.C.S. 12-1001(e)	all	-0-
Life Insurance	735H.C.S. 12-1001	all	-0-
Retirement Plans	735H.C.S. 12-1001	all	7,598.60
Unpaid Wages	735H.C.S. 12-1001(g)	\$4,000 each	8,000.00

Form B6D

(10/05)

In re **WILK, Lawrence C.  
WILK, Geraldine, M.**  
Debtor

Case No.

(If known)

### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor;" include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.



Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER (See Instructions Above)	CODEBTOR HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. 0304143449 Wachovia Mortgage Corp P.O. Box 96001 Charlotte, NC 28296-0001	J					232,465.65	
ACCOUNT NO. 037766983 Ford Credit P.O. Box 790093 St. Louis, MO 63179-0093		VALUES 235,000.00				11,741.96	
ACCOUNT NO.		VALUES 9,605.00					
ACCOUNT NO.		VALUES					
ACCOUNT NO.		VALUES					
Subtotal						244,207.61	
Total							
(If only one page)							

continuation sheets attached

Form filed  
(17060)

WILK, Lawrence C.  
WILK, Geraldine M.

Name \_\_\_\_\_ Debtor: \_\_\_\_\_

Case No. \_\_\_\_\_ (if known)

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 542; Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-C (codebtor). If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. If applicable, also report this total on the Means Test form.

☒ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS** (Check the appropriate boxes below if claims of that category are listed on the attached sheets.)

☐ Domestic Support Obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay, owing to employees and commissions owing to qualifying independent sales representatives up to \$10,000\* per person earned within 180 days immediately preceding the filing of the original petition or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(1).

☐ Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(1).

Form 123 (10/95)

In re WILK, Lawrence C.  
WILK, Geraldine M.  
 Debtor

Case No. \_\_\_\_\_  
 (If known)

## SCHEDULE F- CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112, Fed.R.Bankr.P. 1007(m). Do not include claims listed in Schedules D and L. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor." Include the entity on the appropriate schedule of creditors, and complete Schedule I - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <small>(See instructions above.)</small>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SET OFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL
ACCOUNT NO. 8475269134 956 1 AT & T PO Box 8100 Aurora, IL 60507-8100							167.09
ACCOUNT NO. 013-138-326 36 American Family Insurance Group Madison, WI 53777-0001							938.05
ACCOUNT NO. 16921 Gennbusters PC 75 Remittance Drive, Ste. Chicago, IL 60675-6524							184.37
ACCOUNT NO. G390497A Wellington Radiology Group SC/GSR 9410 Compubill Drive Orland Park, IL 60462							285.00
Subtotal							\$ 1,574.51
Total							\$

☐ continuation sheets attached

(Use only on last page of the completed Schedule F.)  
 (Report also on Summary of Schedules.)

to re \_\_\_\_\_  
WILK, Lawrence C.  
WILK, Geraldine M.  
Debtor

Case No. \_\_\_\_\_ (If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODER/TOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SET OFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT REDUCTING VALUE OF COLLATERAL
ACCOUNT NO 036 061 090 0580 Country Door 1112 17th Avenue Monroe, WI 53566-1364							140.29
ACCOUNT NO 5440-4550-2932-6116 HSBC Card Services P.O. Box 17051 Baltimore, MD 21297-1051							534.63
ACCOUNT NO 4888 9400 3428 1333 Bank of America P.O. Box 15726 Wilmington, DE 19886-5726							10,149.98
ACCOUNT NO 039-7272-832 Kohl's Payment Center P.O. Box 2983 Milwaukee, WI 53201-2983							622.01
ACCOUNT NO 5049-9480-0460-3280 Sears Credit Cards P.O. Box 183081 Columbus, OH 43218-3081							3,082.75
Subtotal ➤							\$ 14,529.66
Total ➤							\$

(Use only on last page of this completed Schedule 7)  
(Repeat also on Summary of Schedules.)

Debtor WILK, Lawrence C.  
WILK, Geraldine M.

Case No. \_\_\_\_\_  
 (If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
 (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above)	CODEBTR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL
ACCOUNT NO 4071 1000 0451 3663 Wells Fargo Financial Bank P.O. Box 98751 Las Vegas, NV 89193-8751							6,224.09
ACCOUNT NO 5049-9401-4971-3561 Sears Credit Cards P.O. Box 183081 Columbus, OH 43218-3081							3,165.94
ACCOUNT NO 0000-7259-441-901 US Bank Belmont Avenue Office PO Box 790179 St. Louis, MO 63179-0179							1,000.00
ACCOUNT NO 27-25-75-7870 1 Nicor PO Box 416 Aurora, IL 60568-0001							334.70
ACCOUNT NO 1050203025 Commonwealth Edison Bill Payment Center Chicago, IL 60668-0001							106.72
Subtotal							\$ 10,831.45
Total							\$

File No. \_\_\_\_\_ of \_\_\_\_\_ debts attached to Schedule of  
 Creditors Holding Unsecured Nonpriority Claims

(Use only on last page of the completed Schedule F 1  
 (Report also on Summary of Schedules 1)

FORM 1066 - U.S. Bankruptcy Court

In re WILK, Lawrence C.  
WILK, Geraldine M. Debtor

Case No. \_\_\_\_\_ (If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
 (Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	CODER/CR	HOUSING AID, JOINT, OR JOINTLY	DATE CLAIM WAS INCURRED, AND CONSIDERATION FOR CLAIM, IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO WILLA0001 First Stop Foot Care 385 W. Liberty Street Wauconda, IL 60084							328.60
ACCOUNT NO 130-474-125 WFNNB-Avenue PO Box 659584 San Antonio, TX 78265-9584							614.12
ACCOUNT NO 410028-00-110205-7 HFC PO Box 17574 Baltimore, MD 21297-0574							19,349.22
ACCOUNT NO ****4724 Discover Card PO Box 30395 Salt Lake City, UT 84130-0895							3,989.78
ACCOUNT NO 6035 3201 6254 8604 Home Depot Credit Services Processing Center Des Moines, IA 50364-0500							2,390.00

Sheet no \_\_\_\_\_ of \_\_\_\_\_ sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal ▶ \$ 26,671.72  
 (Total of this page)  
 Total ▶ \$ \_\_\_\_\_  
 (Use only on last page of the completed Schedule F.)  
 (Report total also on Summary of Schedules)

Form 101 (Rev. 1-01-01)

Debtor  
WILK, Lawrence C.  
WILK, Grealine M.

Case No. \_\_\_\_\_  
(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	CODEBETOR	ILLUSAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED, AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO TRI.B610721045 Tri-County Emergency Physicians PO Box 369 Barrington, IL 60010-0098							144.00
ACCOUNT NO 610820144 Advocate Good Shepherd Hospital 450 W. Highway 22 BARRINGTON IL 60010							2,172.00
ACCOUNT NO 390497 Best Practices Inpatient Care, Ltd. PO Box 268 Lake Zurich, IL 60047-0268							833.00
ACCOUNT NO 861-1-0003750588 Midwest Diagnostic Pathology, SC. 75 Remington Dr., Ste. 3070 Chicago, IL 60675-3070							69.30
ACCOUNT NO 4121-7414-0514-5967 Capital One-Visa Platinum PO BOX 5294 Carol Stream, IL 60197-5294							3,395.93

Sheet no. 16 of 16 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal > \$ 6,614.23  
(Total of this page)  
Total > \$

(Use only on last page of the completed Schedule F.)

(Report total also on Summary of Schedule F.)



FORM 106 - Cont  
(11-2007)

Debtor  
WILK, Lawrence C.  
WILK, Geraldine M.

Case No. \_\_\_\_\_  
(If known)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE	CODEBETTOR HUSBAND, WIFE, JOINT, OR COMPANY	DATE CLAIM WAS INCURRED, AND CONSIDERATION FOR CLAIM, IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 85437265 Wells Fargo PO Box 98798 Las Vegas, NV 89193-8798						1,289.00
ACCOUNT NO. 5049-9020-2083-7604 Bill Me Later PO Box 105658 Atlanta, GA 30348-5658						459.64
ACCOUNT NO. 036 061 090 0570 Seventh Avenue 1112 17th Avenue Monroe, WI 53566-1364						310.96
ACCOUNT NO. #61072045 Advocate Good Shepherd 450 W. Hwy, 22 Barrington, IL 60010						1,515.23
ACCOUNT NO. 610820144 Advocate Good Shepherd 450 W. Hwy 22 Barrington, IL 60010						2,172.60

Sheet no. \_\_\_\_\_ of \_\_\_\_\_ sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal > \$ 5,747.43  
Total of this page > \$

(Use only on last page of the completed Schedule F.)  
Total all pages > \$ 65,969.00  
(Report total also on Summary of Schedules)

$$1.10.11) \int_1^2 x^2 dx,$$

WILK, Lawrence C.

In re WILK, Geraldine M.

Debtor

Case No. \_\_\_\_\_  
(if known)

### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any time share interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, indicate that by stating "and/or child" and do not disclose the child's name. See 11 U.S.C. § 541; Fed.R. Bankr. P. 1007(m).

☒ Check this box if debtor has no executory contracts or unexpired leases.

[illegible]

Form B01a  
(10/05)

In re WILK, Lawrence C.  
WILK, Geraldine M.  
Debtor

Case No. \_\_\_\_\_  
(if known)

## SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed. Bankr. P. 107(w).

☒ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

Case 08-12330  
(12/08)

In re WILK, Lawrence C.  
WILK, Geraldine M.  
Debtor

Case No. \_\_\_\_\_  
(if known)

## SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 7, 11, 12, or 13 case whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child.

Debtor's Marital Status:	DEPENDENTS OF DEBTOR AND SPOUSE	
Married	RELATIONSHIP: Daughter Justine (Sr. High School) AGE: 18	
Employment:	DEBTOR	SPOUSE
Occupation		
Name of Employer	Menards	Capital First Realty
How long employed	1775 N. RAND Road	875 N. Michigan Avenue
Address of Employer	Palatine, IL 60074	Chicago, IL 60611

INCOME: (Estimate of average monthly income)

DEBTOR

SPOUSE

1. Current monthly gross wages, salary, and commissions  
(Prorate if not paid monthly.)
2. Estimate monthly overtime

\$ 1,506.14 \$ 4,832.43

\$ 0 \$ 0

3. SUBTOTAL

\$ 1,506.14 \$ 4,832.43

4. LESS PAYROLL DEDUCTIONS

- a. Payroll taxes and social security
- b. Insurance
- c. Union dues
- d. Other (Specify):

\$ 321.62 \$ 766.14

\$ 0 \$ 983.12

\$ 45.58 \$ 48.32

5. SUBTOTAL OF PAYROLL DEDUCTIONS

\$ 367.20 \$ 1,797.58

6. TOTAL NET MONTHLY TAKE HOME PAY

\$ 1,138.94 \$ 3,034.85

7. Regular income from operation of business or profession or firm.  
(Attach detailed statement)

\$ \$

8. Income from real property

\$ \$

9. Interest and dividends

\$ \$

10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above.

\$ \$

11. Social security or government assistance  
(Specify):

\$ \$

12. Pension or retirement income

\$ \$

13. Other monthly income  
(Specify):

\$ \$

14. SUBTOTAL OF LINES 7 THROUGH 13

15. TOTAL MONTHLY INCOME: (Add amounts shown on lines 6 and 14)

\$ 0 \$ 0

16. TOTAL COMBINED MONTHLY INCOME: \$ 4,173.79

\$ 1,138.94 \$ 3,034.85

(Report also on Summary of Schedules.)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

For use  
only

Geraldine M. Wilk

Lawrence C. Wilk

to re \_\_\_\_\_  
Debtor

Case No. \_\_\_\_\_  
(if known)

## SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average monthly expenses of the debtor and the debtor's family. Pro rate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.

Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include not rented for mobile home) \$ 2,151.91
  - a. Are real estate taxes included? Yes ☒ No ☐
  - b. Is property insurance included? Yes ☒ No ☐
2. Utilities:
  - a. Electricity and heating fuel \$ 106.00
  - b. Water and sewer \$ 85.00
  - c. Telephone \$ 80.00
  - d. Other Garbage \$ 28.50
3. Home maintenance (repairs and upkeep) \$ 40.83 Cable
4. Food \$ 400.00
5. Clothing \$ \_\_\_\_\_
6. Laundry and dry cleaning \$ \_\_\_\_\_
7. Medical and dental expenses \$ 330.50
8. Transportation (not including car payments) \$ 332.00
9. Recreation, clubs and entertainment, newspapers, magazines, etc. \$ \_\_\_\_\_
10. Charitable contributions \$ \_\_\_\_\_
11. Insurance (not deducted from wages or included in home mortgage payments)
  - a. Homeowner's or renter's \$ \_\_\_\_\_
  - b. Life \$ \_\_\_\_\_
  - c. Health \$ \_\_\_\_\_
  - d. Auto \$ 186.00
  - e. Other \$ \_\_\_\_\_
12. Taxes (not deducted from wages or included in home mortgage payments) (Specify) \$ \_\_\_\_\_
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)
  - a. Auto \$ 433.00
  - b. Other \$ \_\_\_\_\_
  - c. Other \$ \_\_\_\_\_
14. Alimony, maintenance, and support paid to others \$ \_\_\_\_\_
15. Payments for support of additional dependents not living at your home \$ \_\_\_\_\_
16. Regular expenses from operation of business, profession, or farm (attach detailed statement) \$ \_\_\_\_\_
17. Other \$ \_\_\_\_\_
18. TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules) \$ 4,173.70
19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document: \_\_\_\_\_
20. STATEMENT OF MONTHLY NET INCOME
  - a. Total monthly income from Line 16 of Schedule I \$ \_\_\_\_\_
  - b. Total monthly expenses from Line 18 above \$ \_\_\_\_\_
  - c. Monthly net income (a minus b) \$ \_\_\_\_\_

Official Court Case No. 08-12330

WILK, Lawrence C.  
WILK, Geraldine M.

In re  
Debtor

Case No.  
(if known)

## DECLARATION CONCERNING DEBTOR'S SCHEDULES

### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 18 (Total shown on summary page plus 1) sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date 5/13/08

Signature Lawrence C. Wilk  
Debtor Lawrence C. Wilk

Date 5/13/08

Signature Geraldine M. Wilk  
Joint Debtor, Geraldine M. Wilk  
(If joint case, both spouses must sign.)

### DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

I declare under penalty of perjury that (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h) and 312(b), and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section.

Printed or Typed Name of Bankruptcy Petition Preparer

Social Security No.

(Required by 11 U.S.C. § 110)

If the bankruptcy petition preparer is not an individual, state the name, title, address, and social security number of the officer, principal, responsible person, or partner who signs this document.

Address

X  
Signature of Bankruptcy Petition Preparer

Date

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual.

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of any applicable Federal Bankruptcy Procedures may result in fines or imprisonment under 11 U.S.C. § 110 and 18 U.S.C. § 156.

### DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP

I, the \_\_\_\_\_ (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the \_\_\_\_\_ (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_ sheets, and that they are true and correct to the best of my knowledge, information, and belief. (Total shown on summary page plus 1.)

Date \_\_\_\_\_

Signature \_\_\_\_\_

(Print in type name of individual signing on behalf of debtor.)

(An individual signing on behalf of a partnership or corporation must indicate position or role in partnership or corporation.)

Penalty for making a false statement or concealing property: A person who willfully makes a false statement or conceals property in a bankruptcy case may be fined up to \$500,000 or imprisoned for up to 5 years or both. 18 U.S.C. § 156 and 110.